

predictive value and positive and negative likelihood ratios of VELscope were estimated at 90%, 15%, 40% and 71%, 1.06 and 0.63 and for combination of conventional oral examination and VELscope method were 100%, 12%, 42% and 100%, 1.14 and zero, respectively.

Conclusion: This study showed that VELscope can increase sensitivity of conventional oral examination method from 86% to 100%, but as to its low specificity, VELscope is not solely helpful to differentiate between benign lesions and dysplastic and/or malignant lesions. So, it is recommended to use VELscope at secondary care settings in the hands of a specialist. Nevertheless, more studies are needed in this regard.

Evaluating the Relationship between Incidence of Prostate Cancer and Prostate-Specific Antigen Levels

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Background: Prostate cancer is one of the most common cancers in men and the fourth most common cancer in Iran. Prostate specific antigen (PSA) is the most useful tumor marker available for early diagnosis of prostate cancer. The sensitivity and specificity of this test was increased by the total PSA / free PSA ratio

Methods: In this cross-sectional study, medical records of patients who had undergone needle biopsy were extracted from the pathology department of Sina Hospital, Tabriz, Iran. All demographic data, total PSA, and free PSA relative to the total free PSA were recorded in checklists. Finally, the data were analyzed using statistical programs.

Results: In this study, we examined 1,472 patients with an average age of 68 years, mean total PSA level was 3.73 ng/mL (3.82 % less than 4; 11.82 % between 4 and 10; and 5.88% above 10), the average level of free PSA 0.97 ng/mL and 51.8 percent free PSA to total less than 18 percent. In this study, of patients diagnosed with prostatic hyperplasia nodular 32.4 percent had adenocarcinoma. Adenocarcinoma was found in 8.9% of patients with PSA < 4, 13.3% of those with 4 < PSA < 10, and 77.8 % of those with PSA > 10. FNA diagnosis and total PSA (P < 0.001) had a significant correlation, but no significant relationship was observed between FNA diagnosis of patients with free PSA (P = 0.176) or age (P = 0.469).

Conclusion: This study showed that a high percentage of patients who have undergone prostate needle biopsies

of prostate adenocarcinoma had higher total PSA levels compared to others.

Basal Cell Carcinoma Recurrence after Mohs Micrographic Surgery and Factors Affecting it: Retrospective Cohort Study (2007-2015)

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Background: Basal cell carcinoma is a type of non-melanoma skin cancer, accounting for approximately 80 percent of all non-melanoma skin cancers. In recent years, Mohs micrographic surgery has been used for treatment of basal cell carcinoma. The aim of this study was to assess 4-year recurrence rates and factors affecting recurrence in patients with the basal cell carcinoma undergoing Mohs surgery.

Methods: This is a retrospective cohort study. We followed up for four years all patients suffering from non-melanoma skin cancer who referred to Al-Zahra hospital in Isfahan at some point during the 2007-2015. Patients who experienced the recurrence of the disease, those who were deceased before being diagnosed with recurrence and those who could not be followed up for any other reason were excluded from the study. As a result, 211 tumors (198 patients) were included in this study. Logistic regression analysis was used to examine factors affecting surgical recurrence.

Results: The average age of the patients was 63 ± 12.9 years, consisting of 61 percent men and 39 percent women. The male-to-female ratio was 1.57. The highest and lowest location of tumors was the nose (30.3%) and trunk (0.5%), respectively. The most common sites of tumor recurrence were scalp (50%), the nose (15%) and around the eyes (15%). During follow-up after Mohs micrographic surgery, 20 out of 211 cases (9.5%) had recurrence, of whom 13 cases were